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PTO/SB/01 (8-96)
Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

☒ Declaration OR
Submitted
with Initial Filing ☐ Declaration
Submitted after
Initial Filing

Attorney Docket Number

First Named Inventor

Kazumasa Kawabe

COMPLETE IF KNOWN

Application Number

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD OF PRODUCING A SPREAD MULTI-FILAMENT BUNDLE AND AN APPARATUS
USED IN THE SAME

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

07/07/04

as United States Application Number or PCT International

Application Number

PCT/JP2004/010006

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119 (a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or §365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
2003-193895	JAPAN	07/08/03	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2004-34778	JAPAN	02/12/04	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

(Page 1 of 1)

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner of Patents and Trademarks, Washington, DC 20231.

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DECLARATION

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Name	Registration Number	Name	Registration Number
Ronald R. Snider	24,962		
Paul L. Brown	27,184		
Albert Tockman	19,722		

☐ Additional registered practitioner(s) named on a supplemental sheet attached hereto.

Direct all correspondence to:

Name	Snider & Associates				
Address	PO Box 27613				
Address					
City	Washington	State	DC	ZIP	20038-7613
Country	US	Telephone	202-347-2600	Fax	202-347-7870

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name	Kazumasa	Middle Initial		Family Name	Kawabe	Suffix e.g. Jr.	
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Inventor's Signature	Kazumasa Kawabe	Date	11/28/05
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Residence: City	FUKUI	State		Country	JAPAN	Citizenship	JAPANESE
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Post Office Address	Room No.102, FAMILIE S B1, 43-25, Tohmyoji-cho, Fukui-shi				
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Post Office Address					
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City	FUKUI	State		Zip	910-0062	Country	JAPAN
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☒ Additional inventors are being named on supplemental sheet(s) attached hereto

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor											
Given Name		Shigeru				Middle Initial				Family Name		Tomoda				Suffix e.g. Jr.					
Inventor's Signature		<i>Shigeru Tomoda</i>										Date		11 / 28 / 05							
Residence: City		FUKUI				State				Country		JAPAN				Citizenship		JAPANESE			
Post Office Address		2-1-63, Takaekyoumachi, Harue-cho, Sakai-gun, FUKUI																			
Post Office Address																					
City		FUKUI				State				Zip		919-0479				Country		JAPAN			
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor											
Given Name						Middle Initial				Family Name						Suffix e.g. Jr.					
Inventor's Signature												Date									
Residence: City						State				Country						Citizenship					
Post Office Address																					
Post Office Address																					
City						State				Zip						Country					
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor											
Given Name						Middle Initial				Family Name						Suffix e.g. Jr.					
Inventor's Signature												Date									
Residence: City						State				Country						Citizenship					
Post Office Address																					
Post Office Address																					
City						State				Zip						Country					
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor											
Given Name						Middle Initial				Family Name						Suffix e.g. Jr.					
Inventor's Signature												Date									
Residence: City						State				Country						Citizenship					
Post Office Address																					
Post Office Address																					
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Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor											
Given Name						Middle Initial				Family Name						Suffix e.g. Jr.					
Inventor's Signature												Date									
Residence: City						State				Country						Citizenship					
Post Office Address																					
Post Office Address																					
City						State				Zip						Country					
Additional inventors are being named on supplemental sheet(s) attached hereto										<input type="checkbox"/>											